PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000

appropriate. All further cor	respondence including the pelow or directed otherwise	Patent, advance ord	lers and notifica	BLICATION FEE (if requirements of maintenance fees	uired). Blocks 1 through 4 swill be mailed to the currents; and/or (b) indicating a sep	t correspondence address as
CURRENT CORRESPONDENCE	E ADDRESS (Note: Legibly mark-	up with any corrections or t	Fee(s) Transmittal. T	f mailing can only be used this certificate cannot be used	for any other accompanying	
7:	690 01/08/2004			papers. Each addition have its own certifica	al paper, such as an assignm te of mailing or transmission.	ent or formal drawing, must
SUGHRUE, MIC	N, ZINN, MACPE	AK & SEAS		Ce	rtificate of Mailing or Tran	smission
2100 Pennsylvania Avenue, N.W.				I hereby certify that t	his Fee(s) Transmittal is beir with sufficient postage for fi il Stop ISSUE FEE address	ng deposited with the United
Washington, DC 20	0037	01.6	.	addressed to the Ma transmitted to the US	il Stop ISSUE FEE address PTO, on the date indicated be	s above, or being facsimile low.
•			<u>\$</u> \			(Depositor's name)
	,	APR 0 1 2004	u.	(Signature)		
	TZ,	Á	<i>)</i>			(Date)
APPLICATION NO.	FILING DATE	DASSIA ENTE	IRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/933,828	08/22/2001	Akira Hi		ama	Q65905	7274
TITLE OF INVENTION: METHOD FOR CUTTING HONEYCOMB CO			lE.		. *	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	04/08/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		
TENTONI, LEO B		1732		264-028000		
1. Change of correspondence CFR 1.363).	e address or indication of "I	Fee Address" (37		For printing on the patent front page, list (1) the see of up to 3 registered patent attorneys or SUGHRUE MION,		
·	ones address (on Change of	C		to 3 registered patent a lternatively, (2) the name		CE MION,
Address form PTO/SB/13	ence address (or Change of 22) attached.	Correspondence		as a member a registered e names of up to 2 regis	attorney or	
☐ "Fee Address" indicati PTO/SB/47; Rev 03-02 o Number is required.	on (or "Fee Address" Indica or more recent) attached. Us	ation form se of a Customer	attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO I	BE PRINTED ON TI	HE PATENT (pi	rint or type)		
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN	d to the USPTO or is being	submitted under sep	arate cover. Con	n the patent. Inclusion of a pletion of this form is NO (CITY and STATE OR CO	ssignee data is only appropri T a substitute for filing an ass UNTRY)	ate when an assignment has ignment.
• •	KOGYO KABUSHI	• •	TOKYO,	•	,	
			ĺ	,	/	
Please check the appropriate	assignee category or category	ories (will not be prin	nted on the pater	it); 🔾 individual 🗹	corporation or other private g	roup entity 🖸 government
4a. The following fee(s) are	enclosed:	4b.	Pavment of Fee	•		
A check is attached for the NOA Fees payment.						
Please charge any payment deficiency and py overpayment, to						
			credit ove	rpayment to POI	DA 19-4880.	
Director for Patents is reque	sted to apply the Issue Fee a	and Publication Fee (if any) or to re-a	pply any previously paid	issue recardance apparent	above.
(Authorized Signature)	MAD	(Date)	25-04			
Peter D. Off	WO WIX	A R	Reg. 24,5	13		
NOTE; The Issue Fee and other than the applicant;	d Publication Fee (if require a registered attorney or last cords of the United States P	red) will not be acc gent; or the assigned	epted from anyone or other party	one		
This collection of informa obtain or retain a benefit application. Confidentiality estimated to take 12 minus completed application for case. Any comments on suggestions for reducing to Patent and Trademark (22313-1450. DO NOT S	tion is required by 37 CFF by the public which is to y is governed by 35 U.S.C. es to complete, including g m to the USPTO. Time w the amount of time you his burden, should be sent Office, U.S. Department END FEES OR COMPLI	R 1.311. The inform file (and by the USI 122 and 37 CFR 1.14 gathering, preparing, ill vary depending u require to complete to the Chief Inform of Commerce, AI ETED FORMS TO	ation is required PTO to process) 4. This collection and submitting upon the individe this form and ation Officer. U	an 04/02/20 the ual 1/0r / 02 FC:150	04 GWORDOF2 00000023 (01 04	09933828 1330.00 OP 300.00 OP
Under the Paperwork Re	for Patents, Alexandria, Viduction Act of 1995, no nless it displays a valid OM	persons are require	d to respond to	o a		